



First Class Passport

Overseas Travel Insurance

August 2020 Edition

Dear Insured,

You have just procured overseas travel insurance with **Harel Insurance Company Ltd.**, the leading company which has specialized in overseas travel insurance for dozens of years. "**First Class Passport**" insurance plan, including all its sections which are included in this booklet, coupled with the Insurance Details Sheet, including all the details, exclusions and comments included therein, constitutes your insurance policy.

The policy extensions that may be purchased for extra premium:

- Deterioration of Pre-existing Medical Condition - for cover of Medical Expenses deriving from Pre-existing Medical Condition
- Luggage (accompanied personal baggage) - loss or theft
- Cancellation and Shortening a Trip (there is an option of increasing the coverage in the case of an epidemic, for additional insurance fees)
- Pregnancy up to week 32 to an insured under 42 years of age
- Death or loss of organs as a result of an accidental event to an insured (up to the age of 70)
- Extreme sport
- Winter sport
- Loss or theft of a laptop/tablet
- Loss or theft of a cellular phone
- 2 wheel bicycle (up to 90 days) - total loss or theft or damage exceeding 50%
- Cancellation of deductible in case of accidental damage to a hired car/ caravan Abroad (to a driver between 24 to 75 years of age)

Harel Insurance Company Ltd. and its entire staff and assistance services will accompany you in your journey abroad for your safe stay and complete enjoyment.

Have a good trip

Harel Insurance Company Ltd.

Table of Contents

Limits of Liability Table for Part A - Basic Policy.....	4
Part A - Terms of Policy for Overseas Travel Insurance - Basic Policy.....	6
Chapter 1: Definitions.....	6
Chapter 2: Hospitalization Expenses Abroad.....	10
Chapter 3: Non-hospitalization Medical Expenses Abroad.....	12
Chapter 4: Special expenses.....	14
Chapter 5: Search, location and rescue expenses through Harel Search and Rescue.....	16
Chapter 6: Liability to third parties.....	19
Chapter 7: General exclusions for all Policy chapters including Part B - Extensions.....	21
General Conditions.....	23
Chapter 8: Non-disclosure under the Insurance Contracts Law.....	23
Chapter 9: Claim.....	24
Chapter 10: Policy cancellation.....	27
Chapter 11: Policy extension.....	28
Chapter 12: General.....	29
Chapter 13: Law and jurisdiction.....	31
Limits of Liability Table for Part B -	
Extensions for overseas travel insurance policy for extra premium.....	32
part B - Extensions to the Basic Policy	
Chapter 14: Extension for luggage (personal accompanied baggage) - loss or theft.....	35
Chapter 15: Extension for Trip cancellation and shortening.....	38
Chapter 16: Extension for Deterioration of Pre-existing Medical Condition.....	45
Chapter 17: Extension for pregnancy up to week 32 to an Insured under 42 years of age.....	46
Chapter 18: Death or loss of organs as a result or an accidental event to an Insured (up to the age of 70).....	47
Chapter 19: Extension for extreme sport.....	49
Chapter 20: Extension for winter sport.....	50
Chapter 21: Extension for loss or theft of a laptop/tablet.....	53
Chapter 22: Extension for loss or theft of a cellular phone.....	54
Chapter 23: Extension for 2 wheel bicycle (up to 90 days) - total loss or theft or damage exceeding 50%.....	55
Chapter 24: Extension for cancellation of Deductible in case of accidental damage to a hired car/caravan Abroad (to a driver between 24 to 75 years of age).....	58
Contact Centers.....	60

Limits of Liability Table for Part A - Basic Policy

Section in Policy	Cover	Limit of liability	Deductible
Chapter 2 & Chapter 3	Insurer's limit of liability for Medical Expenses	\$5,000,000	
2.1	Medical Expenses Abroad during hospitalization	Included in Medical Expenses Liability Limit	Without Deductible
2.2.1	Land evacuation from place of Event to nearest Hospital	Included in Medical Expenses Liability Limit	Without Deductible
2.2.2	Air and/or water evacuation from place of Event to nearest Hospital	Included in Medical Expenses Liability Limit	Without Deductible
2.3	Medical Flight to Israel	Included in Medical Expenses Liability Limit	Without Deductible
3.1	Non-hospitalization Medical Expenses Abroad such as Physician, diagnostic tests	Included in Medical Expenses Liability Limit	Without Deductible
3.2	Medications	\$1,500	\$50
3.3	Emergency dental treatment	\$400	\$50
3.4	Physiotherapy Abroad	\$500 per treatment and up to 6 treatments	\$50
3.5	Continued treatment in Israel as a result of an Accident that occurred Abroad	\$10,000 and up to 120 days	Without Deductible
3.5.1	Cast removal, nail removal and physiotherapy in Israel	\$6000 included in limit of liability of continued treatment in Israel	20% per treatment
Chapter 4	Special expenses		
4.1	Reimbursement as a result of staying Abroad beyond the Period of Insurance	As specified below	Without Deductible
4.1.1	Accommodation expenses Abroad beyond the Period of Insurance	\$150 per day	\$50
4.1.2	Plane ticket to Israel for the Insured	\$1,000	\$50
4.2	Flight and stay of an Escort at the Insured's place of hospitalization Abroad	\$2,500	\$50
4.3	Pregnancy first diagnosed Abroad	Included in Medical Expenses Liability Limit	Without Deductible
4.3.1	Non-hospitalization Medical Expenses Abroad	Included in limit Medical Expenses Liability Limit	\$50

Section in Policy	Cover	Limit of liability	Deductible
4.3.2	Hospitalization Medical Expenses	Included in Medical Expenses Liability Limit	\$50
4.4	Transportation of deceased expenses	Included in Medical Expenses Liability Limit	Without Deductible
Chapter 5	Search, location and rescue expenses through Harel Search and Rescue	\$250,000	Without Deductible
Chapter 6	Liability to third parties	\$150,000	Without Deductible

Part A – Terms of Policy **for Overseas Travel Insurance – Basic Policy**

Chapter 1: The definitions apply to all the policy terms and parts unless otherwise explicitly indicated:

1. Definitions:

1.1. The Insurer:

Harel Insurance Company Ltd.

1.2. The Insured:

Anyone whose name is listed on the Schedule as an insured.

1.3. Insured's Age:

The age of the Insured is determined according to the Insured's date of birth, as determined on the Insurance Details Sheet.

1.4. The Policy:

This insurance contract between the Insured and the Insurer, including the Proposal, the Schedule, medical condition statements, and the extensions attached thereto, if any.

1.5. The Basic Policy:

The insurance cover set forth in Part A in Chapters 1-13 including the general terms.

1.6. Proposal:

The Proposal form, which constitutes an application to join the insurance under this Policy when it is complete, including all the details thereof, including the medical statement completed by the Insured and the payment method details.

1.7. The Schedule / Insurance Details Sheet:

A document attached to this Policy **constituting an integral part thereof** that includes the details, statements and terms required for adjusting the insurance Policy to the terms of the Insured's insurance contract. **In any event of contradiction between the terms of the Policy and the terms set forth in the Insurance Details Sheet, the terms set forth in the Insurance Details Sheet shall govern.**

1.8. Abroad:

Any place or country outside the State of Israel, including a watercraft or aircraft on their way from or to Israel, excluding the territories of the Palestinian Authority and enemy states.

1.9. Trip:

One exit from Israel Abroad and back to Israel.

1.10. Trip Destination:

A country Abroad where the Insured stays continuously more than 24 hours during the Period of Insurance.

1.11. The Period or Period of Insurance:

The period of the travel insurance as indicated on the Schedule, provided that it does not exceed the Maximal Period, with the addition of 48 hours at the most, if a delay is caused by the means of transportation with which the Insured was about to return to Israel.

1.12. The Maximal Period:

The maximal period for the Basic Policy:

Age	Maximal period (in days)
Up to age 60 (inclusive)	45
61-70 (inclusive)	30
71-80 (inclusive)	15
81-85 (inclusive)	10
86-95 (inclusive)	7

All the periods above are with the addition of 48 hours at most, if a delay is caused by the means of transportation with which the Insured was about to return to Israel. Extending the Period of Insurance is according to the terms set forth in Chapter 11.

1.13. Event/Insured Event:

An Accident and/or Disease and/or medical condition and/or event as described in the following chapters of the Policy that occurred to the Insured Abroad during the Period of Insurance **which are not the result of a Pre-existing Medical Condition.**

1.14. Pre-existing Medical Condition:

A Disease and/or medical condition due to which the Insured was under treatment, including drug therapy and/or under care when leaving Abroad or during the 6 months preceding his leave and excluding when receiving the treatment was the purpose of the Trip.

1.15. Deterioration of Pre-existing Medical Condition:

An adverse change of a Pre-existing Medical Condition the treatment of which was vital as an emergency treatment Abroad and the Insured could not medically postpone the treatment until returning to Israel.

1.16. Disease:

A medical disorder or problem or disruption in the medical condition of body organs or physical disorder with identifiable signs and symptoms or any inappropriate condition or dysfunction of the body.

1.17. Accident:

A physical injury sustained as a result of applying physical power only, as a result of an abrupt one-time unforeseeable Event, directly caused by an external, visible force, which consists, regardless of any other cause, the only, direct and immediate reason for the occurrence of the Insured Event. **For the avoidance of doubt, physical violence and/or mental stress and/or the accumulation of small repetitive injuries throughout a period that result in incapacity will not be deemed an "Accident".**

1.18. Hospital:

A medical institute acknowledged by the competent authorities Abroad as a general hospital only, **excluding an institute which is sanatorium, convalescent home, nursing home, rehabilitation institute.**

1.19. Hospitalization Expenses:

Payment for hospitalization and medical services given in a Hospital during hospitalization.

1.20. Hospitalization Day:

A continuous stay at a Hospital for 24 hours.

1.21. Medical Expenses:

Expenses for a Physician care and/or diagnostic tests and/or Medication and/or accessory on loan in connection with an Accident (such as crutches, walking frame) given to the Insured during the Period of Insurance, not during Hospitalization **and not in any of the following - sanatorium, convalescent home, nursing home, rehabilitation institute.**

1.22. Medical Flight:

A flight with a regular aircraft service with or without the accompaniment of a medical staff and/or in a special aircraft with the accompaniment of a medical staff which is medically adapted to the condition of the Insured who is transported from Aboard to Israel under the conditions set forth in Section 2.3 hereunder.

1.23. Physician:

A person qualified by the competent authorities to practice medicine in the country where he practices.

1.24. Specialist:

A Physician who was granted a specialist degree in a certain medical area by the competent authorities in Israel under Article 2 of the Physicians' Regulations (Approval of the Title of Specialist and Examinations), 5733-1973, and whose name is included in the list of specialists published under Article 34 of said regulations or a Physician who has a specialist license in a certain medical area by the legally competent authorities in the relevant country Abroad where the service is given.

1.25. Medication:

A chemical or biological substance designed to treat a medical condition Abroad for the purpose of stabilizing the medical condition, preventing its deterioration (including preventing the development of additional medical conditions) or preventing the reoccurrence thereof as a result of a Disease or an Accident, until the Insured's return to Israel.

1.26. Prescription:

A medical document signed by a Physician who confirmed the need for treatment/ Medication, determined the method of treatment, the required dose and the length of required treatment.

1.27. Immediate Relative:

The Insured's spouse, parents, children, siblings, grandfather, grandmother, grandchildren.

1.28. Escort:

A person accompanying the Insured according to the instructions of a Physician Abroad or accompanies the Insured as a result of an Event during his stay Abroad or return to Israel.

1.29. Limits of Liability Table:

A table under which the maximal cover amounts are defined which the Insurer undertakes to pay the Insured upon the occurrence of the Insured Events according to the terms of insurance.

1.30. Deductible:

The Insured's share in the expenses due to an Insured Event as set forth in the Limits of Liability Table in the Policy. **It is hereby clarified that the Insurer's liability to pay insurance benefits in case the Insured is required to pay deductible shall be according to the Insured's actual expenses up to the maximal amount under the Limits of Liability Table, less deductible, and only with respect of the Insured's expenses beyond that deductible.**

1.31. Israel:

The territory of the State of Israel including the territories held by the State of Israel, excluding the territories of the Palestinian Authority.

1.32. Dollar:

US Dollar.

Chapter 2: Hospitalization Expenses Abroad

2. The Insurer will pay the Insured expenses for the occurrence of an Event, will provide the Insured with a letter of financial undertaking or provide him with a service as follows:
- 2.1. Expenses of Hospitalization, examinations, X-ray, Medications, surgeon, intensive care, provided that these have been made during Hospitalization at a Hospital, **in a semi-private ward**. The cover under this section is up to Medical Expenses Liability Limit of \$5,000,000 and subject to the Limits of Liability Table in the Policy.
 - 2.2. **In case of evacuating the Insured to Hospital:** insomuch that the Insured's medical condition requires to transport him to the nearest Hospital to his whereabouts or to another Hospital which is suitable to his medical condition, the Insured will be entitled to indemnification from the Insurer for such expenses of evacuation and/or transport, up to the amount stated in the Limits of Liability Table in the Policy and subject to the provisions of Sections 2.2.1 and 2.2.2 hereunder.
 - 2.2.1. **Land evacuation and/or transport:** if the Insured's medical condition enables evacuation and/or transport by any land means of transportation which is suitable to the Insured's medical condition, according to a Specialist's medical evaluation, the Insured will be entitled to reimbursement of such expenses of evacuation and/or transport, up to the Medical Expenses Liability Limit of \$5,000,000 and subject to the Limits of Liability Table in the Policy.
 - 2.2.2. **Water or air evacuation and/or transport:** if the Insured's medical condition does not enable, according to a Specialist's medical evaluation, evacuation and/or transport by land means of transportation as stated above, the Insured will be entitled to reimbursement of the expenses of evacuation and/or transport by a water and/or air means of transportation (including air ambulance), provided that the Insured filed an application with the Insurer for receiving the Insurer's prior approval for such evacuation/transport prior to the actual evacuation. The Insurer may request the Insured to provide it with such medical evaluation by a Physician on its behalf. In the event that the Insured fails to approach the Insurer for receiving its approval, prior to such evacuation or transport, the Insurer may decrease the amount of insurance benefits to which the Insured will be entitled to the rate the Insurer would have paid had the Insured approach the Insurer applying for receiving such approval prior to the evacuation or transport.

It is clarified and emphasized that the Insurer's undertaking under this section and its sub-sections is for financial indemnification of the Insured only for the Insured's expenses for the evacuation/transport, and the Insurer is not and will not be liable to arranging such evacuation/transport which have not been made on its behalf, in any way of form.

2.3. **Medical Flight** - upon the occurrence of an Insured Event, the Insurer will enable and arrange a Medical Flight as defined in Section 1.22 of the Definitions, and will transport the Insured to Israel for further treatment, subject to meeting the following **accumulative** conditions:

- (a) A need may arise for medical interference during the flight;
- (b) The Medical Flight is medically possible and necessary;
- (c) The flight is possible in terms of the time and place where the Insured stays.

The way of transport will be determined by a Physician on behalf of the Insurer under coordination with the caring Physician Abroad following receipt of accurate information as to the Insured's medical condition and the option of treating the Insured in the place where he became ill or was injured.

The Insurer's undertaking under this section is conditioned with the above flight being made by the Insurer and/or anyone on its behalf only up to the Medical Expenses Liability Limit of \$5,000,000 and subject to the Limits of Liability Table in the Policy. If the flight is not performed by the Insurer and/or anyone on its behalf, the Insurer may decrease the amount of insurance benefits to which the Insured will be entitled to the rate the Insurer would have paid had the flight was performed on its behalf.

For the avoidance of doubt, in the event of a Medical Flight, the plane tickets in possession of the Insured will be assigned in favor of the Insurer, at the Insurer's request.

Chapter 3: Non-hospitalization Medical Expenses Abroad

3. The Insurer will pay the Insured for Medical Expenses incurred Abroad for the occurrence of an Event, for expenses, or provide the Insured with a letter of financial undertaking as follows:
- 3.1. **Physician care, diagnostic tests, imaging tests or medical fittings installed as a result of an Accident** up to the Medical Expenses Liability Limit of \$5,000,000 and subject to the Limits of Liability Table in the Policy.
 - 3.2. **Prescription drugs** – purchased Abroad under a Physician's instruction who determined that they are vital to stabilize the Insured's condition Abroad (**Medication which are regularly and continuously consumed by the Insured will not be covered**) up to \$1,500 as stated in the Limits of Liability Table in the Policy. Deductible of \$50 will apply to this section.
 - 3.3. **Emergency dental care** – emergency and dental first aid services **only** which are required immediately for pain relief, including as a result of an Accident up to an amount of \$400 as stated in the Limits of Liability Table in the Policy. Deductible of \$50 will apply to this section. (**Regular dental care or treatment that may be postponed until the Insured returns to Israel will not be covered**).
 - 3.4. **Physiotherapy following an Accident** – 6 physiotherapy sessions following an Accident, given by a qualified physiotherapist directly following and as a result of the Accident, up to an amount of \$500 for session and subject to the amount stated in the Limits of Liability Table in the Policy. Deductible of \$50 will apply to this section.
 - 3.5. **Continued treatment in a medical institute as a result of an Accident that occurred Abroad** – the Insurer will pay the Insured or provide him with a financial undertaking for Medical Expenses for medical care in Israel during **hospitalization and not during hospitalization**, in a medical institute authorized by the Ministry of Health in Israel to perform medical treatments, continuously to an Accident that occurred Abroad which is covered under this Policy, expensed in a period of up to 120 days of the earlier of: the day of his arrival in Israel or the ending date of the Period of Insurance, and in any event not more than \$10,000 as stated in the Limits of Liability Table in the Policy.
 - 3.5.1. If the continued care in Israel as a result of an Accident that occurred Abroad as stated above is physiotherapy or removal of cast or nails in Israel, the Insurer's undertaking is up to 80% of the Insured's actual expenses for treatment and up to \$6,000 as stated in the Limits of Liability Table in the Policy. It is clarified that this amount will be included in the cover overhead for this section at an amount of \$10,000 and will not be in addition thereto.

It is emphasized that the Insurer's liability under Chapter 3, for payment for medical care directly to a service provider Abroad (except in an event of indemnification for expenses which is paid directly to the Insured or in an event where the Insured paid a debt to a service provider due to his entitlement to insurance cover), will be in accordance with the acceptable rates in Israel for receiving treatment, and up to an amount of \$5,000,000 and subject to the Limits of Liability Table in the Policy.

The Insurer's total maximal undertaking for all the Medical Expenses under Chapters 2, 3 and Section 4.4 hereunder expensed during the Period of Insurance (hereinabove and hereinafter: "Medical Expenses Liability Limit") will not exceed \$5,000,000 and subject to the Limits of Liability Table in the Policy.

Chapter 4: Special expenses

4. The Insurer will pay special expenses for an Event as follows:

4.1. **Reimbursement for staying Abroad beyond the Period of Insurance** - In case an Insured Event occurs to the Insured which is covered under this Policy when he is Abroad during the Period of Insurance and the Period of Insurance ended under the terms of the Policy, and the Insurer received an opinion of a Specialist that there is a risk to the Insured's health and life and therefore he cannot yet fly to Israel and this finding has been confirmed and is acceptable by a Physician on behalf of the Insurer:

4.1.1. The Insurer will indemnify the Insured for the cost of accommodation expenses for the period following the Period of Insurance in a hotel in the place of the Insured's whereabouts until the receipt of a medical confirmation under which the Insured is fit to return to Israel and up to an amount of \$150 per day and subject to the Limits of Liability Table in the Policy. Deductible of \$50 will apply to this section.

4.1.2. The Insurer will indemnify the Insured for a plane ticket to Israel purchased in advanced and up to an amount of \$ 1,000 and subject to the Limits of Liability Table in the Policy. Deductible of \$50 will apply to this section.

For the avoidance of doubt, plane tickets to Israel in possession of the Insured will be assigned in favor of the Insurer, at the Insurer's request.

4.2. **Flight and stay of an Escort in the Insured's place of hospitalization Abroad** - if the Insured is hospitalized Abroad and his hospitalization exceeds 3 days or the Physician Abroad determines that his life is in danger, the Insurer will pay one Escort the cost of a plane ticket (as set forth in Chapter 11.2 hereunder) and travel expenses to the Insured's place of hospitalization as well as cost of accommodation expenses, everything up to an amount of \$2,500 and subject to the Limits of Liability Table in the Policy. Deductible of \$50 will apply to this section.

4.3. **Pregnancy up to week 12 first diagnosed Abroad:**

The Insurer will bear Medical Expenses as detailed below for pregnancy up to week 12 first diagnosed Abroad up to an amount of \$5,000,000 and subject to the Limits of Liability Table in the Policy.

4.3.1. The Insurer will bear Non-hospitalization Medical Expenses Abroad as a result of pregnancy **first diagnosed Abroad** by way of a documented medical diagnosis during the Insured's stay Abroad. **Such expenses will be covered provided that they were expensed up to week 12 inclusive.** Deductible of \$50 will apply to this section.

4.3.2. The Insurer will bear Hospitalization Medical Expenses Abroad as a result of pregnancy **first diagnosed Abroad** by way of a documented medical diagnosis. **Such expenses will be covered provided that they were expensed up to week 12 inclusive.** Deductible of \$50 will apply to this section.

4.3.3. The Insurer will not pay expenses or claims relating to or deriving from one or more of the following cases pursuant to Sections 4.3.1 and 4.3.2:

4.3.3.1. Abortion not following a medical need.

4.3.3.2. Expenses of pregnancy follow-up, routine tests and genetic tests excluding tests for pregnancy initial diagnosis only.

4.3.3.3. Expenses incurred after the end of week 12 of the pregnancy unless a Specialist opinion states that there is a danger to the health and/or life of the Insured and/or fetus.

4.4. Transportation of deceased expenses:

In case the Insured passes away during the Period of Insurance following an Insured Event covered under this Policy, the Insurer will bear the deceased transportation expenses to Israel, under the explicit condition that this transportation will be performed by the Insurer and/or anyone on its behalf and under coordination with the Insurer and up to the Medical Expenses Liability Limit at an amount of \$5,000,000 and subject to the Limits of Liability Table in the Policy.

The Insurer's total maximal undertaking under this chapter will not exceed the maximal amount stated in the Limits of Liability Table in the Policy.

Chapter 5: Search, location and rescue expenses through Harel Search and Rescue

5. Cover for search, location and rescue will apply to countries where such cover may be activated and is included in the premium unless the Insured requested not to purchase this cover -

5.1. Additional definitions for this chapter:

5.1.1. **Harel Search and Rescue:**

A group of people selected by the Insurer for its unique qualifications and skills to perform search and rescue actions, as stated in Chapter 5 of the Policy. This team may include a psychologist recognized as such by the competent authorities in Israel.

5.1.2. **Call Center:**

The Insurer's call center for contact by the telephone number and/or Internet website indicated in the Policy and/or by the following e-mail address:

669@harel-ins.co.il

5.1.3. **Loss of Contact:**

Discontinuation, for unclear and unknown reasons, for a period exceeding 14 days or less than this - at the Insurer's discretion, according to the circumstances of the event, of the contact between the Insured and any of his Immediate Relatives and/or Escort and/or the Call Center, and as a result of this discontinuation, none of his Immediate Relatives, the Escort and/or the Insurer has any information as to the whereabouts of the Insured, and under the explicit condition that such discontinuation occurred during the Period of Insurance.

5.1.4. **Location:**

Locating the Insured's whereabouts.

5.1.5. **Rescue:**

The removal of an Insured who is unable to arrive on his own from his whereabouts to a safe place (for this purpose, a safe place - a populated place near his whereabouts with a police station or a Hospital) following an emergency endangering the Insured's life or a condition the deterioration of which might result in a life-threatening situation.

5.1.6. **Active Period:**

A maximal 30-day period during which a continuous effort is made to search, locate and rescue the Insured in a case of Loss of Contact.

5.1.7. **Passive Period:**

A maximal 180-day period starting after the end of the Active Period, during which the search, Search and Rescue actions are renewed as required in a case of Loss of Contact, according to information and/or other substantial and unequivocal evidence that justify, at the Insurer's discretion, the renewal of said actions and the activity involved therewith.

5.2. **Insurer's undertaking** - the Insurer will act on its own and/or through anyone on its behalf to search, Locate and Rescue the Insured (hereinafter: **"the Search**

Operation”), in a case of Loss of Contact or in the case of need for Rescue as defined above, during the Active Period or Passive Period **and up to such date when the costs of actions reach a maximal cost of \$250,000 and subject to the Limits of Liability Table in the Policy - the earliest of them**, everything as set forth hereunder.

- 5.2.1. In the event that the Call Center is informed of a No-Contact event, the Insurer will activate the Search Operation as follows:
 - 5.2.1.1. The Insurer will, through a Harel Search and Rescue Team in Israel, investigate the circumstances of the Loss of Contact with the Insured.
 - 5.2.1.2. If the Insured is not located during the investigation process as stated in Section 5.2.1.1 above, within 14 work days as of the Loss of Contact date, the Insurer will activate the Search Operation, in accordance with the details received in the investigation conducted under Section 5.2.1.1, whether through a Harel Search and Rescue team sent by it from Israel or by an international and/or local team activated by the Insurer's Harel Search and Rescue team and/or in combination of these teams or part thereof.
 - 5.2.1.3. Notwithstanding the provision of Section 5.2.1.2 above, the Insurer has the right to activate the Search Operation also if the above 14 days have not elapsed at its sole discretion and under such circumstances as it finds fit to do so.
- 5.2.2. Under the Search Operation, the Insurer will bear the flight expenses of one Immediate Relative (as defined in Section 1.27) in a regular aircraft service, if it is requested to do so, so that the foregoing would join the Operation team, provided that the Insured has not been located yet. The Immediate Relative who joins the Operation will not be entitled to interfere with the discretion of the Operation staff members.
- 5.2.3. The Insurer will bear all the expenses related to the Operation and will to that end activate means of transportation of any kind, in accordance with the circumstances.
- 5.2.4. The Insurer undertakes to activate all the provisions of Section 5.2 above throughout the Active Period or until the costs of actions and expenses reach a maximal amount of \$250,000 (as specified in the Limits of Liability Table in the Policy), the earlier of them.
- 5.2.5. The Insurer will continue with the Operation also following the end of the Active Period above for the duration of the Passive Period if the conditions set in the definition of the Passive Period have been met and under the explicit condition that the maximal amount for the Insurer's undertaking has not been exhausted under this chapter (as specified in the Limits of Liability Table in the Policy).
- 5.2.6. After the earlier of: the end of the Passive Period and/or when the costs of actions and expenses reach the maximal amount for the Insurer's undertaking under this chapter, the Insurer will terminate the Search Operation and its undertaking and liability will end under this chapter.

The Insurer will report an Immediate Relative specifying all the actions it has performed within 30 days of the end of the Active or Passive Period, as applicable.

- 5.2.7. In the event that the Insurer finds out, during or prior to the Operation, that the Insured has died, it will act under this chapter for searching and/or Locating and/or Rescuing the Insured's body. The Insurer's undertaking to transport the body to Israel will be in accordance with Section 4.4 above.
 - 5.2.8. The cooperation of the Immediate Relatives with the Insurer and/or anyone on its behalf is essential and constitutes a precondition for fulfilling the Insurer's undertakings under this chapter.
 - 5.2.9. The Insurer's undertaking under this chapter will not guarantee the success of the Search Operation and the Search and Rescue of the Insured. The Insurer undertakes to reasonably do whatever it can under the existing circumstances for the success of the Search Operation; however, if, despite of the Insurer's efforts, it fails to Locate or Rescue the Insured, this will not be considered a breach of the Insured's undertaking under this chapter and/or any of its conditions.
 - 5.2.10. Under no event will the Insured and/or anyone on his behalf be entitled to receive the insurance benefits or part of them due to Location, search and/or Rescue and/or due to expenses they made for these purposes.
 - 5.2.11. The Insured undertakes to cooperate with the Insurer regarding anything relating to the actions specified in this chapter.
- 5.3. The Insurer will not pay for claim/s deriving from or relating to:**
- 5.3.1. Loss of Contact as a result from a political and/or security situation Abroad.
 - 5.3.2. If the Insurer is unable to activate the Search Operation as a result from a political and/or security situation Abroad.
 - 5.3.3. A Search Operation in a country that does not permit and/or allow the actions of a Search and Rescue team including a Search Operation in one of the following countries: Oman, Saudi Arabia, Iraq, Syria, Lebanon, Libya, Kuwait, Qatar, Algeria, Afghanistan, Mauritania, Malaysia, Indonesia, Niger, Iran, Somalia, Sudan, Pakistan, Chad, North Korea, the continent of Antarctica, Yemen, territories under the control or administration of the Palestinian Authority, and territories held by terrorist organizations.
 - 5.3.4. A Search Operation in situations where there is an imminent life risk to a Harel Search and Rescue team.
 - 5.3.5. The Insured refuses to cooperate with the Insurer's representatives and/or anyone acting on its behalf and/or refuses to return to Israel.

The Insurer's total undertaking for all the expenses and costs under this chapter will not exceed a maximal amount of \$250,000 and until the end of the Active or Passive Period as defined above, the earlier of them, and as stated in the Limits of Liability Table in the Policy.

Chapter 6: Liability to third parties

6. Cover for liability to third parties is included in the premium unless the Insured requests not to purchase this cover.

Insurer's undertaking – the Insurer will indemnify the Insured for damage to a third party that occurred Abroad to body or property for which the Insured owes, up to a total amount of \$150,000 and subject to the Limits of Liability Table in the Policy. A condition to fulfilling the Insurer's liability under this chapter will be adjusting the Insured's liability to a third party to the definition of this liability in Israel under the Torts Ordinance.

It is hereby clarified that immediately when the Insured finds out about an Event that may result in a claim under this chapter and when he finds out about the instigation of proceedings or investigation, he must inform the Insurer accordingly in writing. The Insurer may conduct, on behalf of the Insured, any proceeding or compromise, and the Insured will cooperate with it. The Insured will not conduct any negotiations, make any proposition or admit to any liability, but under coordination with the Insurer. The Insured undertakes to act in cooperation with the Insurer.

6.1. The Insurer will not pay for claims that derive from and/or relate to:

- 6.1.1. Employers' liability, contractual liability or liability to the Insured's relatives.
- 6.1.2. Liability following a deliberate act, malicious act or committing a crime or misdemeanor.
- 6.1.3. Liability to animals that belong to or are under the control of or are held by or are at the supervision of the Insured.
- 6.1.4. Liability to an occupation, business or profession.
- 6.1.5. Liability to ownership or possession or use of a vehicle, aircraft or watercraft.
- 6.1.6. Liability as a result of dealing with extreme sport as defined in Chapter 19 and with winter sport as defined in Chapter 20, except if an extension for extreme sports or for winter sports was purchased and noted on the Schedule.
- 6.1.7. The Insured's use of a weapon.
- 6.1.8. Liability to ownership of or holding real estate or a building (except for when the occupation thereof is for the purpose of temporary residence).
- 6.1.9. Cash, checks of any kind, stamps, credit cards, photographic films, tickets of all kinds (train, bus, theatre and other shows etc.), computer software, diskettes, compact discs, memory cards, cellular phones.
- 6.1.10. Business work tools and/or commercial goods including business samples.
- 6.1.11. Eyeglasses, contact lenses, hearing aids, medical fittings, dentures, Medications (as baggage).
- 6.1.12. Art objects, all that whether it occurred to the item separately or as part of the entire baggage.

- 6.1.13. Normal wear and tear, erosion, gradual wearing out, any damage to luggage (except in the event of fire of a suitcase or bag), loss resulting from confiscation, expropriation, loss resulting from the Insured's gross negligence which fully contributed to the occurrence of the Insured Event, or failure to take reasonable steps to prevent, mitigate or recover it.
- 6.1.14. Loss caused to valuables held not on the Insured's body (unless unlikely to be worn on the Insured's body all day) or not in his personal bag, unless the valuables have been stored in a safe or another secured place.
- 6.1.15. The Insurer will not be liable to any consequential and/or direct damages.

The Insurer's total maximal undertaking under this chapter will not exceed the maximal stated amount of \$150,000 and subject to the Limits of Liability Table in the Policy.

Chapter 7:

General exclusions for all Policy chapters including Part B – Extensions

7. Without prejudice to any exclusions provided for in any chapter and in addition thereto, the Insurer will not pay claim(s) for an Event deriving from or relating to:
 - 7.1. Routine tests or screening tests or ongoing medical care including ongoing medication treatment.
 - 7.2. Hospitalization and Medical Expenses for medically unnecessary actions and/or which may medically be postponed until the Insured's return to Israel or that the treatment may be continued in Israel and the return to Israel is medically possible.
 - 7.3. Pregnancy first diagnosed Abroad after week 12.
 - 7.4. Treatment by a chiropractor, naturopath, homeopath, health program, acupuncture, mechanotherapy, hydrotherapy, alternative treatments and complementary medicine, physiotherapy (except as stated in Section 3.4 Chapter 3).
 - 7.5. Periodical inspection or check-up, surgery and/or gum treatments, dental treatments (except for emergency care as stated in Chapter 3 section 3.3 above), cosmetic-aesthetic surgery and/or treatment, plastic surgery, rehabilitation.
 - 7.6. Medical or other devices purchased in Israel and/or Abroad; for damage and/or loss Abroad of eyeglasses, optical glasses, contact lenses, hearing aids and various dentures. This exclusion will not apply to a medical devices installed Abroad as a result of an Accident that occurred Abroad.
 - 7.7. Transplantation of an organ or organs of any kind.
 - 7.8. Medical Flight performed not through the Insurer.
 - 7.9. Volcanic eruption, nuclear fission, nuclear fusion or radioactive pollution.
 - 7.10. Flight not as a passenger with a commercial airline in a regular aircraft service confirmed by the authorities, except for a flight included under the definition "Extreme Sport" if an extension was purchased for extreme sport and was listed on the Insurance Details Sheet.
 - 7.11. The Insured's active participation in an act of war and/or military action.
 - 7.12. The Insured's active participation in a police action, underground action, revolution, rebel, pogroms, riots, sabotage, terror.
 - 7.13. Committing crime, misdemeanor, drug trafficking, activity without a suitable valid license for such activity if required in the country of Event.
 - 7.14. The Insured's use of weapon.
 - 7.15. Suicide, taking one's life or an attempt thereof, deliberate self-inflicted damage by the Insured.
 - 7.16. The Insured's kidnap except Medical Expenses for it.
 - 7.17. Alcoholism, drug abuse.
 - 7.18. Extreme Sport as defined in Chapter 19 and/or Winter Sport as defined in Chapter 20 under the Policy (except if a cover was purchased and was listed on the Schedule) and in any event, a Winter Sport not practiced on a resort during the resort's proclaimed activity hours and in the tracks designated to that end will not be covered.

- 7.19. Sport activity in a reward containing competition and/or professional sport, namely sport constituting the Insured's main occupation and/or which entails monetary wage.
- 7.20. The Insured's active participation in car and/or motorcycle race(s) (including snowmobiles) and/or other vehicles including watercraft and/or driving/riding in any vehicle on a race course whether or not as part of a race.
- 7.21. Consequential damage, including and without prejudice to the generality of the foregoing, expenses deriving from loss and waste of time for any reason, cancellation of a transaction including postponement, delay, bankruptcy, loss of work days and wage, sick days, loss of benefit, anguish, pain and suffering, nursing assistance etc.
- 7.22. An Accident as a result of using a vehicle (except a motorcycle) as a driver and/or passenger when the Insured or the driver driving the vehicle did not have a valid driver's license for the type of vehicle he drove (a local and/or Israeli and/or international license), even if in the country of Event there is no need for a driver's license in the vehicle.
- 7.23. An Accident as a result of using a motorcycle as a driver and/or passenger when the Insured or the driver did not have a valid driver's license for the type of motorcycle involved in the accidental Event (a local and/or Israeli and/or international license), except for countries where no special license is required for driving the type of motorcycle involved in the Accident.
- 7.24. Expenses for taxi rides, visas, fees, levies, taxes, telephone calls, faxes, legal expenses and attorney's fees, interest, bank expenses, fines etc.
- 7.25. Temporary mental condition.
- 7.26. The Insurer will not be liable to the very availability of medical services, to the provision of services, their quantity, the results of providing them and/or their quality. The Insurer will further not be liable to any case where the Insured refrains from seeking and/or receiving medical assistance.
- 7.27. Any Insured Event that occurs prior to the beginning of the Period of Insurance, between non-consecutive Periods of Insurance (hereinafter - Loss of Contact Situation) within and beyond the Maximal Period.

- General Conditions -

Chapter 8: Non-disclosure under the Insurance Contracts Law

8. Duty of disclosure

- 8.1. If the Insurer presents to the Insured prior to signing the contract, whether by way of an insurance Proposal form or otherwise in writing or in another documented way, a question in a matter which may affect the willingness of a reasonable insurer to sign the contract in general or sign it under the conditions thereof (hereinafter – Material Matter), the Insured must provide a written complete, honest reply.
 - 8.1.1. A comprehensive question that involves various matters, without any distinction between them, does not require such reply, unless it was reasonable at the time of signing the contract.
 - 8.1.2. Concealing with deceitful intentions on the part of the Insured of an issue he knew was a Material Matter will be deemed as providing a reply which is incomplete and dishonest.
- 8.2. If an incomplete, dishonest reply is given to a question on a Material Matter, the Company may, within thirty days of the day it finds out about it and as long as no Insured Event has occurred, cancel the Policy by a written notice to the Insured.
- 8.3. If the Company cancels the Policy by virtue of this section, the Insured is entitled to refund of the premium paid for the period following the cancellation less the Company's expenses, unless the Insured acted with deceitful intentions.
- 8.4. If the Insured Event occurs prior to the cancellation of the Policy by virtue of this section, the Company will only have to pay reduced insurance benefits in a pro-rata rate which is as the ratio between the insurance premium that would have been paid as customary at the Company according to the actual situation and the agreed insurance premium, and the Company is entirely exempt in any of the following:
 - 8.4.1. The reply was given with deceitful intentions.
 - 8.4.2. A reasonable insurer would not have entered into that contract even for a higher insurance premium, had it known the real situation; in this case the Insured is entitled to refund of the insurance premium paid for the period following the occurrence of the Insured Event less the Company's expenses.
- 8.5. The Insurer is not entitled to the above remedies in any of the following, unless the incomplete and dishonest reply was given with deceitful intentions:
 - 8.5.1. It knew or should have known the real situation at the time of signing the contract or it caused the reply to be incomplete and dishonest.
 - 8.5.2. The fact with respect of which an incomplete and dishonest reply was given ceased to exist prior to the occurrence of the Insured Event or did not affect the Event, the Insurer's liability or the scope thereof.

Chapter 9: Claim

9. Provisions for the Claim chapter:

- 9.1. The Insured will cooperate with the Insurer before and after filing of the claim and will do as required to allow the Insurer to clarify its liability for payment under the terms and scope of the Policy.
- 9.2. The Insured will inform the Insurer as promptly as possible of any Event and will provide it as soon as possible with all the documents, including a signature of the waiver of medical confidentiality and confirmations, including the following ones:

- 9.2.1. **Hospitalization at a Hospital Abroad:**

The Hospitalization documents from the Hospital where the Insured was hospitalized.

- 9.2.2. **Non-hospitalization Medical Expenses Abroad:**

- A Physician's document and additional relevant documents required by the Insurer.
- Prescription for the need of purchasing Medications.

- 9.2.3. **Plane ticket:**

An unused plane ticket, the new purchased ticket and the caring Physician's confirmation explicitly testifying as to the Insured's inability to return on the originally planned date.

- 9.2.4. **Loss or theft of luggage - provided that an extension for luggage was purchased (personal accompanied baggage) - loss or theft (under Chapter 14):**

An accurate, detailed description of the details of the Event, details of the lost or stolen luggage, place of purchase of lost or stolen luggage, and amount of claim for lost or stolen luggage together with the confirmations specified hereunder, as applicable.

Notice confirmation of the Event at the place of Event Abroad:

A vital condition for handling a claim (in each and every case): confirmation of a notice to the airline or office responsible for another public transportation vehicle, as applicable, if the Event occurred during a flight or Trip, purchase confirmations of the lost or stolen luggage, and confirmation of the Customs Authorities in Israel as to the exit of taxable luggage, confirmation of the Police at the place of Event Abroad in the case of a theft.

- 9.2.5. **Loss of payments due to cancellation/shortening of a Trip - provided that an extension for trip cancellation and shortening was purchased (under Chapter 15):**

The official and/or medical certificates and documents to the extent possible, proving the reason of cancellation, the Insured's entitlement and its scope, such as: confirmations of the travel agency as for the rate of payment given to the Insured, receipts for payment or confirmations on deposits, confirmations of orders, confirmations of airlines etc. Any receipt and confirmation confirming the cost and charges charged to the Insured following the cancellation of the Trip and his failure to leave the country and/or as a result of shortening the Trip.

- 9.3. Compliance with the provisions of this chapter, including all sections thereof, by the Insured is a pre condition to the Insurer's liability and to the payment of any compensation or indemnification under the Policy.
- 9.4. The Insurer may, at its discretion, pay the insurance benefits or some of them, directly to the service providers.
- 9.5. The Insured is entitled to receive from the Insurer a letter of financial undertaking for the service provider allowing him to receive medical service, provided that his entitlement under the Policy is not controversial.
- 9.6. Insurance benefits by virtue of this Policy will be paid in Israeli currency, as follows:
- 9.6.1. Insurance benefits to which the Insured is entitled for reimbursement paid in Israeli currency will be paid in Israeli currency and will be linked to the consumer's price index as of the date of their payment by the Insured until the payment date of the Insurance benefits.
- For the purpose of examining the limit of liability, insurance benefits to which the Insured is entitled will be calculated for reimbursement paid in Israeli currency, according to the dollar value of every payment according to the type of exchange rate according to which the Insured paid the insurance premium known at the payment date of the insurance benefits.
- For the purpose of this section, "index" – the consumer's price index published by Israel Central Bureau of Statistics or, in the absence of such publication, an index published by another official body replacing it, or any index designated for health services.
- 9.6.2. Any insurance benefits to which the Insured is entitled for reimbursement paid in a currency which is a non-Israeli currency will be converted from the currency in which they were paid to US Dollar and from it to Israeli currency according to the exchange rate known at the payment date of the insurance benefits of the type of exchange rate according to which the Insured paid the insurance premium.
- 9.6.3. Any insurance benefits to which the Insured is entitled not for reimbursement will be paid in Israeli currency according to the exchange rate known at the payment date of the insurance benefits of the type of exchange rate according to which the Insured paid the insurance premium.
- 9.7. **The Insured will not be entitled to insurance benefits exceeding the limit of liability. The total insurance benefits paid, for the purpose of examining the limit of liability, will be calculated according to the value in US Dollar of every payment in accordance with the exchange rate according to which the Insured paid the insurance premium known at the date of making the payment.**

Notice of the occurrence of the Insured Event and thwarting liability clarification:

- 9.8. If the Insured Event occurred, the Insured will inform the Insurer of it immediately after he has found out about it, and the beneficiary will inform the Insurer immediately after he has found out about the occurrence of the Event and of his right to the insurance benefits; delivery of such notice by one of these releases the other from his duty.

- 9.9. (a) Once a notice about the occurrence of the Insured Event and a written claim for the payment of insurance benefits have been delivered to the Insurer, the Insurer will immediately do as required to clarify its liability.
- (b) The Insured or the beneficiary, as applicable, will deliver the Insurer, within a reasonable time after he was requested to do so, the information and documents required to clarify the liability, and if these are not in his possession, he will assist the Insurer to obtain them, as much as he can.
- 9.10. (a) If an obligation under Section 9.8 or under Section 9.9(b) has not been fulfilled in a timely manner, and the fulfillment thereof would have allowed the Insurer to reduce its liability, **it is not obligated to pay the insurance benefits but at the extent it would have had to pay them had the obligation been fulfilled;** this provision will not apply to any of the following:
- 9.10.1. The obligation was not fulfilled or was fulfilled in delay for justified reasons;
- 9.10.2. The non-fulfillment or delay of the obligation did not prevent the Insurer to clarify its liability and did not complicate the clarification.
- (b) If the Insured or the beneficiary deliberately makes an action which could prevent the Insurer to clarify its liability or complicate it, the Insured is not obligated to pay the insurance benefits but at the extent he would have had to pay them had such action not been made.
- 9.11. If an obligation is breached under Section 9.8 or under Section 9.9(b) or an action is made as stated in Section 9.10(b) or the Insured or beneficiary provided the Insurer with false facts or concealed from it facts regarding the Insured Event or regarding the Insurer's liability, and this was done with deceitful intentions - the Insurer is exempt from its obligation.

Chapter 10: Policy cancellation

- 10.1. If the Policy is cancelled by the Insured before he goes Abroad and he has not filed a claim for Trip cancellation, the insurance premium he paid will be refunded to him.
- 10.2. In case of shortening a stay Abroad, the Insured will be entitled to a pro-rata refund of the unused daily insurance premium, **provided that no claim was filed under this Policy in the framework of an extension for Cancellation and Shortening of a Trip (insofar as such an extension was purchased)**. The Insured will be entitled to refund of the insurance premium for the shortened Trip days (during which he is not Abroad) provided that he presents a photocopy of his passport which includes an entry stamp to Israel or a biometric confirmation receipt or alternatively a confirmation from the Ministry of the Interior of the date of entry to Israel.

Chapter 11: Policy extension

- 11.1. **Policy extension within the Maximal Period** – an Insured who wishes to extend his stay Abroad **under this Policy and the Maximal Period has not yet ended** may request, while still Abroad, to extend the overseas travel insurance for an additional period within the Maximal Period, under the following conditions:

11.1.1. The Insured will file an application for the extension of the Period of Insurance prior to the expiration of the Period of Insurance of the Policy.

11.1.2. The Period of Insurance will be extended by the Insurer under insurance continuity until the earlier of: the period requested by the Insured or the end of the Maximal Period of Insurance, without re-examining Pre-existing Medical Condition and without a qualification period.

Such insurance will be under similar conditions (cover and price) to the conditions of the Insured's insurance Policy, which are valid with the Insurer on the time of extending the Period of Insurance.

11.1.3. If an Insured requests, in a documented application, to extend the Period of Insurance after the expiration of the Period of Insurance of the Policy, the Insurer will extend the insurance for him as of the date of his application until the earlier of: the period he applied for or the end of the Maximal Period.

Such insurance will be under similar conditions (cover and price) to the conditions of the Insured's insurance Policy, which are valid with the Insurer on the time of extending the Period of Insurance, without re-examining Pre-existing Medical Condition and without a qualification period.

Anything relating to and/or deriving from an Insured Event that occurred between non-consecutive Periods of Insurance (hereinafter - Severance Situation) will not be covered within and beyond the Maximal Period.

- 11.2. **Policy extension following a stay Abroad beyond the Period of Insurance** – if an Insured Event occurs to an Insured which is covered under this Policy while being Abroad during the Period of Insurance and/or if he is hospitalized Abroad and following the Event or during his Hospitalization, the Period of Insurance expires under this Policy, and the opinion of a licensed Physician has been provided to the Insurer to the effect that the Insured is unable to return to Israel following the medical event or Hospitalization, the Period of Insurance will be extended until such date as the Physician determined that the Insured may return to Israel. The extension application will be submitted to the Insurer and will be dealt with after the medical documents relating to the Hospitalization are provided to the Insurer, for extra insurance premium, under such conditions and restrictions as will be determined by the Insurer.

The Insurer's undertaking in this case will be in accordance with the provisions of Section 4.1 above.

Chapter 12: General

12.1. Deductible:

Deductible will be charged where indicated for any Insured Event or cover as defined in any of the Policy chapters at the amount specified in the terms of Policy and in the Limits of Liability Table. **It is hereby clarified that the Insurer's liability to pay insurance benefits in an event where the Insured must pay Deductible will be according to the Insured's actual expenses up to the maximal amount according to the Limits of Liability Table, less Deductible only with respect of the Insured's expenses beyond such Deductible.**

12.2. In the event of receiving medical services Abroad which are covered under the Policy through a supplier which is under an arrangement with the Insurer, a reduced Deductible will apply if this has been indicated on the Insurance Details Sheet.

12.3. Insurance with other firms:

12.3.1. Upon filing a claim, the Insured will provide the Insurer with a written notice of any other insurance he has against the risks covered under this Policy.

12.3.2. This Policy will cover any loss or theft or expense which are covered under the terms of this Policy if such cover was purchased, even if at the time of the occurrence of the Event subject of such loss or damage or expense other insurance or insurances existed with respect thereof, whether those have been procured by the Insured or by another, up to the limit of liability set in the Policy. The Insurer will have a right of subrogation against the other insurer and/or insurers with respect of the corresponding amount.

12.3.3. If the Insured claims payment from the Insurer for any loss and/or expense and/or damage where there is a third party liability to cover them pursuant to the law and/or under an agreement, including an insurance agreement, and such payment has been paid by the Insurer, the Insurer will have a right of subrogation for the amounts it paid the Insured against the third party and against the Insured if they were paid to the Insured by the third party.

12.3.4. If any payments were made by the Insurer as stated in Section 12.3.3 above, any right the Insured had or has against any third party will transfer to the Insurer at the rate of the amount of insurance benefits the Insurer paid the Insured. The Insured will assign his rights to the third parties in favor of the Insurer up to the rate of the amount stated in this section.

12.3.5. The Insured will cooperate with the Insurer and will take any action so as to allow the receipt of amounts paid by the Insurer and were under the liability of the third party.

12.4. The Insured may not, without the Insurer's prior, written consent, admit to any liability or assume any liability which binds the Insurer.

12.5. The Insurer will be entitled to conduct, on behalf of the Insured, any proceeding deriving from its liability under this Policy.

12.6. Extensions (Chapters 5, 6, 14-24):

12.6.1. It is hereby declared and agreed that if any extension has been purchased by the Insured and the Insurance Details Sheet indicates that it has been purchased, the Company will pay the Insured insurance benefits according to the provisions and exclusions specified in the extension.

It is clarified that the extensions are only in force if they have been purchased, all or some of them, at the Insured's choice, for extra insurance premium and have been explicitly indicated on the Schedule as purchased extensions. **If no extensions have been purchased, all or some of them – at the Insured's choice and/or the Schedule does not indicate that extensions have been purchased, no insurance cover will apply to them.**

12.6.2. Any purchased extension is subject to all of the terms of the Policy.

12.6.3. Any change and/or waiver and/or digression from the provisions of the Policy will only be binding for the purpose of any purchased extension if they are explicitly included therein.

12.6.4. In any event of contradiction between the provisions of the purchased extension and the provisions of other appendices of the Policy and/or the provisions of the general terms of the Policy, the provisions of the extension, for the purpose thereof, will bind.

12.7. Insurance premium according to the Trip Destination:

12.7.1. The insurance premium will be determined in accordance with the Trip Destination(s) chosen by the Insured under the Proposal (**hereinafter – "the Trip Destination"**).

12.7.2. It is clarified that the Trip Destination affects the insurance premium and is a Material Matter subject to the duty of disclosure in accordance with the provisions of Chapter 8 above.

12.8. Limitation period:

The limitation period of a claim for insurance benefits is 3 years of the date of Event, except for a third party claim. If the cause of claim is loss of organs for an Insured resulting from an Accident (as stated in Chapter 18 hereunder), the limitation period will be counted as of the day the Insured had a right to claim insurance benefits under the terms of the insurance contract.

Chapter 13: Law and jurisdiction

13. Any legal proceeding pursuant to or deriving from this Policy will be judged according to the laws of the State of Israel and the exclusive venue in any such proceeding will be at the competent courts in the State of Israel only pursuant to the law.

For the avoidance of doubt, the general terms specified in Chapters 8-13 above will apply to the entire Policy, including Chapter A (the Basic Policy) and Chapter B (Policy extensions - insomuch that these have been purchased by the Insured).

Limits of Liability Table for Part B – extensions for overseas travel insurance policy for extra premium

Section in Policy	Cover	Limit of liability	Deductible
Chapter 14	Luggage (personal accompanied baggage) – loss or theft out of which:	\$2,250	
14.4.1	Limitation per item	\$300	\$50
14.4.2	Valuables	\$500	\$50
14.4.3	Purchase of vital items in the event of late arrival of luggage	\$150	\$50
14.4.4	Value of suitcase and/or bag and/or purse	\$75	Without Deductible
14.4.5	Camera and its accessories	\$350	\$50
14.4.6	Reconstruction of documents	\$250	Without Deductible
Chapter 15	Trip cancellation and shortening		
15.2	Trip cancellation out of which: plane ticket for the Insured	\$5,000 \$2,000	\$50
15.3	Trip shortening out of which: plane ticket for the Insured	\$7,000 \$2,000	\$50
15.4	Refund for a travel ticket that was cancelled in the case of a medical event due to a pandemic	\$400	Without Deductible
15.5	Loss of payments overseas in the case of a medical event due to a pandemic	\$150 per day accommodation expenses and up to a maximum total of \$1,000.	Without Deductible
15.7	Increase in the ceiling of the refund for the rider on Cancellation and Shortening of a Trip During an Epidemic (in return for additional insurance fees)		
15.7.1	Cancellation of Travel (due to an epidemic) and within this: Ticket for travel of the Insured	\$5,000 \$2,000	Without Deductible

Section in Policy	Cover	Limit of liability	Deductible
15.7.2	Extension or Shortening of Stay Abroad and within this: Ticket for travel of the Insured	\$5,000 \$2,000	Without Deductible
Chapter 16	Deterioration of Pre-existing Medical Condition	\$350,000	Without Deductible
Chapter 17	Pregnancy up to week 32 to an Insured under 42 years of age	\$350,000	Without Deductible
Chapter 18	Death or loss of organs as a result or an accidental event to an Insured (up to the age of 70)		Without Deductible
	Loss of organs only	\$13,500	Without Deductible
	Death	\$50,000	Without Deductible
Chapter 19	Extreme sport	Included in the Medical Expenses Liability Limit in the Basic Policy	\$50
Chapter 20	Winter sport		
20.2	Hospitalization Medical Expenses	Included in the Medical Expenses Liability Limit in the Basic Policy	Without Deductible
20.2	Non-hospitalization Medical Expenses	Included in the Medical Expenses Liability Limit in the Basic Policy	\$50
20.2.1	Indemnification for loss of ski days	\$300	\$50
20.2.2	Trip cancellation due to lack of snow at the ski resort Plane ticket Ground services	 \$300 \$50 per day up to 6 actual ski days	\$50
20.2.3	Delay in arrival at ski resort due to weather	\$50 per day up to 6 actual ski days	\$50
20.2.4	Loss of 50 ski days as a result of closing the resort for a period of 48 hours and more	\$75 per day up to 6 actual ski days	\$50
20.2.5	Delay in arrival of winter sport equipment Out of which: one item	\$200 \$20	Without Deductible
Chapter 21	Loss or theft of a laptop/tablet	\$2,000	\$100
Chapter 22	Loss or theft of a cellular phone	\$750	\$200
Chapter 23	2 wheel bicycle (up to 90 days)		

Section in Policy	Cover	Limit of liability	Deductible
	Loss or theft (as per required insured sum according to bicycle value which is recorded on the Schedule) Damage or theft while with an air carrier	\$2,500 \$4,500 \$6,000 As per purchased amount	Total loss - \$50 Theft - \$250 \$1,000
Chapter 24	Cancellation of Deductible in case of accidental damage from a hired car/caravan (to a driver from 24 to 75 years of age)	\$1,500	Without Deductible

Chapter B - Extensions to the Basic Policy

This extension will only be in force if purchased by the Insured for extra premium and the Schedule indicates that an extension was purchased

Chapter 14: Extension for luggage (personal accompanied baggage) - loss or theft

14. Provided that this cover was purchased for extra premium and this was explicitly indicated on the Schedule.

14.1. Additional definitions for this chapter:

14.1.1. Luggage:

Personal baggage for private use accompanying the Insured or located at the place of accommodation of the Insured and/or apartment where he stays Abroad. For this purpose, new baggage - baggage purchased up to 12 months of the purchase date.

14.1.2. Valuables:

Precious metal, diamond, jewelries, gem, watch, various photography equipment, computer(s) including PDA, laptop and related accessories, music player.

14.1.3. Document Reconstruction:

A document which is a passport, driver's license and/or plane ticket.

14.2. Period of Policy regarding Luggage insurance: as of the Insured's departure of his house directly on his way Abroad or if he delivered the Luggage to the carrier before that - as of the moment of delivery, until his return from Abroad directly to his house, everything within the Period of Insurance as noted on the schedule.

14.3. Insurer's undertaking: the Insurer will pay and indemnify the Insured in the event of loss or theft of Luggage up to a total amount of \$2,250 and subject to the Limits of Liability Table in the Policy, but not exceeding its actual value (with deduction of wear and tear and Deductible).

14.4. Insurance benefits:

Out of the maximal amount for Luggage, the insurance benefits will be limited up to an amount to \$2,250 and subject to the Limits of Liability Table in the Policy for each of the following sections:

14.4.1. One item and/or a set of items (including related items to the set) up to an amount of \$300 and subject to the Limits of Liability Table in the Policy. Deductible of \$50 will apply to this section.

14.4.2. Valuables up to an amount of \$500 and subject to the Limits of Liability Table in the Policy. Deductible of \$50 will apply to this section.

14.4.3. Purchase of vital items in the event of late arrival of Luggage - provided that the length of delay will be more than 24 hours of the

Insured's arrival at his Destination – against receipts produced by the Insured for purchasing vital items for the continuation of his stay Abroad. The indemnification for this section will be with deduction of the amount paid to the Insured by the airline he used up to an amount of \$150 and subject to the Limits of Liability Table in the Policy. Deductible of \$50 will apply to this section.

- 14.4.4. Loss of suitcase or bag (including backpack) or purse up to an amount of \$75 and subject to the Limits of Liability Table in the Policy.
- 14.4.5. Camera and its accessories up to a total amount of \$350 and subject to the Limits of Liability Table in the Policy. Deductible of \$50 will apply to this section.
- 14.4.6. Document Reconstruction up to a total amount of \$250 and subject to the Limits of Liability Table in the Policy.

14.5. Deduction of wear and tear:

- 14.5.1. In the event that the lost or stolen Luggage was new Luggage and the Insured has purchase receipts from dates preceding the date of loss/theft to that effect, the Luggage will be evaluated by the Insurer with no deduction for wear and tear and not exceeding the maximal amount stated in the Limits of Liability Table in the Policy.
- 14.5.2. In the event that the lost or stolen Luggage was not new or the Insured does not have purchase receipts from dates preceding the date of loss/theft, the stolen/lost Luggage will be evaluated by the Insurer but in any event the maximal payment paid for the loss and/or theft of any Luggage will be the value of the item as new less wear and tear (except for in the event of silver/gold jewelries) of approximately 35% of the claimed amount but not exceeding the maximal amount stated in the Limits of Liability Table in the Policy.

- 14.6. **Luggage in possession of air carrier (above the amount paid by a carrier or third party):** for any Luggage in possession of an air or land carrier or which was under the responsibility of a third party, the Insurer will indemnify the Insured only for damage which is above the amount paid by the carrier or third party and up to the Insurer's limit of liability under this Policy, everything subject to the provision of Section 12.3 (Insurance with other firms).

- 14.7. **Other exclusions for this chapter in addition to the exclusions of the Basic Policy:** The Insurer will not pay any claim(s) deriving from or relating to:

- 14.7.1. Cash, checks of any kind, stamps, credit cards, photographic films, tickets of all kinds (train, bus, theatre and other shows etc.), computer software, diskettes, compact discs, memory cards, cellular phones.
- 14.7.2. Business work tools and/or commercial goods including business samples.
- 14.7.3. Eyeglasses, contact lenses, hearing aids, medical fittings, dentures, Medications (as baggage).
- 14.7.4. Art objects, fragile objects, all that whether the theft and/or loss occurred to the item separately or as part of the entire baggage.

- 14.7.5. Normal wear and tear, erosion, gradual wearing out, machinery or electric breakdown or malfunction, any damage to Luggage (except in the event of fire of a suitcase or bag), loss resulting from confiscation, expropriation, loss resulting from the Insured's gross negligence which fully contributed to the occurrence of the Insured Event, or failure to take reasonable steps to prevent, mitigate or recover it.
- 14.7.6. Loss caused to Valuables held not on the Insured's body (unless unlikely to be worn on the Insured's body all day) or not in his personal bag, unless the Valuables have been stored in a safe or another secured place.
- 14.7.7. The Insurer will not be liable to any consequential and/or direct damages.

Chapter 15: Extension for Trip cancellation and shortening

15. Provided that this cover was purchased for extra premium and this was explicitly indicated on the Schedule.

15.1. Additional definitions for this chapter:

15.1.1. **Trip Cancellation:**

Non-departure of the Insured and/or one of the nuclear family members from Israel Abroad on the start date of the Period of Insurance listed on the Schedule.

15.1.2. **Trip Shortening:**

The return of the Insured and/or one of the nuclear family members from Abroad to Israel prior to the end of the Period of Insurance listed on the Schedule.

15.1.3. **Plane Ticket:**

A plane ticket purchased for the Insured for a Trip from Israel Abroad; or a plane ticket back to Israel purchased by the Insured Abroad under a Physician's instructions instead of the ticket he purchased upon leaving Israel in order to return to Israel from a certain Destination at the end of the Trip. **It is clarified that the cover under this Policy will apply at the value of a plane ticket in tourist class only.**

15.1.4. **Nuclear Family:** the spouse of the Insured and the children of each of them **who purchased with the Insurer an extension for Trip Cancellation and Shortening for that Trip.**

15.1.5. **Trip Escort:** a person accompanying the Insured on a Trip during his stay Abroad.

15.1.6. **Period for Loss of Payments for Trip Cancellation:** a period starting on the Policy purchase date and ending on the date of flying Abroad.

15.1.7. **Epidemic:** A situation in which there is a sudden rise in the number of cases of illness that may be specific to one country or several countries and is defined as an epidemic by the World Health Organization.

15.2. **Insurer's undertaking in regard of Loss of Payments resulting from Trip Cancellation for an Insured and/or Nuclear Family:**

In the event of Trip Cancellation, the Insurer will indemnify the Insured and/or the Nuclear Family members **(who have a valid Policy with the Insurer, for the insurance of Trips Abroad and an extension for Trip Cancellation and Shortening for that Trip)**, for loss of non-refundable deposits directly related to Trip and/or Plane Tickets and/or payments directly related to the Trip which have been paid in advance or that the Insured should pay and are not refunded and are non-refundable (such as accommodation and rented car) up to a limit of liability of \$5,000 out of which a Plane Ticket for the Insured of up to \$2,000 and subject to the Limits of Liability Table in the Policy. Deductible of \$50 will apply to this section.

- 15.2.1. The Insurer will only pay under Section 15.2 above in the event of Loss of Payments (as of the purchase date of this extension) in regard of of Trip Cancellation resulting from the following events and provided that they occurred following the purchase of this extension:
- 15.2.1.1. Death of the Insured and/or a close relative and/or an accompanying traveler or hospitalization for one day or more of one of them.
 - 15.2.1.2. An illness or accident of the Insured and/or a close relative and/or an accompanying traveler, who because of absence from work (according to confirmation from the employer) by order of a physician **for at least one week**, and this in the week prior to the date of travel. In the case of an Insured who does not work (that is, who has no employer), the said will apply, subject to medical confirmation that he is not fit to travel because his health condition requires full bedrest during the week prior to the date of travel
 - 15.2.1.3. The medical condition as defined above, which occurred or was discovered, as relevant, after purchase of this rider, to the Insured and/or a close relative and/or an accompanying traveler, due to which the trip was cancelled by instruction of a physician **and it is one of the following only:**
 - 15.2.1.3.1. Surgery and/or catheterization
 - 15.2.1.3.2. A fracture, including injury to the integrity of the bone, tear of a ligament and/or tendon and/or meniscus
 - 15.2.1.3.3. Pneumonia and/or ear infection involving intravenous administration of medication **that occurred up to 7 days before the date of travel** and after purchasing this rider
 - 15.2.1.3.4. Entry into a condition of bedrest pregnancy or the definition of a pregnancy as an at-risk pregnancy
 - 15.2.1.3.5. Heart attack and/or cardiovascular event, detection of cancer, stroke
 - 15.2.1.4. Cancellation of travel in the period beginning 14 days prior to the date of travel and ending the date of travel, if a fire, explosion, deliberate damage, storm, flood occurred in the home of the Insured, and also if the presence in person of the Insured is required for the purpose of a police investigation due to a break-in or attempted break-in to his home or business.
 - 15.2.1.5. Trip Cancellation to an Insured who is in reserve service by virtue of Section 8 (Reserve Service in Emergency) or Section 9 (Reserve Service in Special Circumstances) to the Reserve Service Law, 5768-2008.

15.2.1.6. Cancellation of a Trip of an Insured who is in professional military service due to participation of the Insured in operational activity.

15.2.1.6.1. "Operation activity" for this matter means - military activity that does not last more than 72 hours.

15.2.1.6.2. The Insured must provide the Insurer with written proof, signed by the confirming party, that confirms that the operational activity prevented the Insured from going Abroad and as a result of the operational activity, he had to cancel the Trip.

"Confirming party" in this section means - a commander/officer at the rank of at least brigadier general.

15.3. Insurer's undertaking in regard of Loss of Payments due to Trip Shortening for an Insured and/or Nuclear Family:

In the event of Trip Shortening as defined in Section 15.1.2, the Insurer will indemnify the Insured and/or the Nuclear Family (**who have a valid Policy with the Insurer, for the insurance of Trips Abroad and an extension for Trip Cancellation and Shortening for that Trip**), for the pro-rata share of the expenses paid by the Insured in advance (such as accommodation and rented car) calculated proportionally from the date of occurrence of the Insured Event, namely each lost day of planned Trip and/or for Plane Ticket and/or the difference for an existing Plane Ticket and an alternative non-refundable Plane Ticket up to a total amount of \$7,000 out of which a Plane Ticket for the Insured of up to \$2,000 and subject to the Limits of Liability Table in the Policy. Deductible of \$50 will apply to this section.

15.3.1. The Insurer will only pay under Section 15.3 above as a result of the following events that occur after the purchase of this extension:

15.3.1.1. A medical event that occurred Abroad to the Insured and/or the Nuclear Family and/or a Trip Escort which, under a licensed Physician's confirmation the Insured and/or Nuclear Family member and/or Trip Escort was forced to change the planned date of their return to Israel and the originally purchased Plane Ticket could not be used.

15.3.1.2. The death or Hospitalization of the Insured or a Nuclear Family individual or an Immediate Relative or a Trip Escort.

15.3.1.3. Trip Shortening to the Insured and/or Nuclear Family member and/or Trip Escort following reserve service by virtue of Section 8 (Reserve Service in Emergency) or Section 9 (Reserve Service in Special Circumstances) to the Reserve Service Law, 5768-2008.

For the avoidance of doubt, the Insured will assign his right to indemnification for an unused Plane Ticket from a third party in favor of the Insured, at the Insurer's request.

15.4. The undertaking of the Insurer in regard of loss of payment for a ticket to travel due to cancellation of a trip of the Insured and/or nuclear family, in the case of a medical event that occurred due to an epidemic:

In the case of an epidemic as defined above because of which a trip is cancelled, exclusively according to the events listed in this section, the Insurer will indemnify the Insured and/or members of the nuclear family (who hold a valid policy with the Insurer for overseas travel insurance and a rider for cancellation or shortening of a trip in regard of that trip), for the relative portion of the expenses paid by the Insured for a **ticket to travel only** that are not refunded and/or paid in advance and are not refunded and a refund cannot be obtained for them from another party, and up to an overall sum of \$400 per ticket to travel per Insured person, and subject to the specifications in the Limits of Liability Table of the Policy.

The Insurer will pay according to Section 15.4 solely and exclusively due to the following events and on the condition that they occurred during a state of epidemic, after purchasing this rider:

- 15.4.1.** An illness with fever or other symptoms that are likely to indicate the epidemic disease and were detected in the Insured and/or the nuclear family and/or an accompanying traveler, at the airport at preflight examination, and because of which the Insured and/or the nuclear family and/or an accompanying traveler are forbidden to join the flight.
- 15.4.2.** The Insured and/or the nuclear family and/or an accompanying traveler fell ill during the week prior to the date of travel with an illness regarding which an epidemic event was declared.
- 15.4.3.** The Insured and/or the nuclear family are in home quarantine according to a report of the Ministry of Health, which began up to 14 days prior to the time of the travel. **In regard of this section (Section 15.4.3), a qualification period of 3 days will apply, beginning on the date of purchase of this rider, and during which there will be no entitlement to insurance coverage in regard of an insurance event that occurred in this period.**

to eliminate doubt, it is clarified that the coverage in regard of an event as defined in Section 15.4 is not in addition to the undertaking in Section 15.2 above, and the Insured will be entitled to coverage for only one of Sections 15.2 or 15.4, the lower of them in the limits of liability ceiling, subject to the terms specified.

15.5. Undertaking of the Insurer in regard of loss of payments and additional expenses due to staying overseas in the case of a medical event that occurred due to an epidemic:

In the case of an epidemic as defined above because of which the Insured is forced to extend or shorten his stay overseas **according to the events listed in this section only**, the Insurer will indemnify the Insured and/or members of his nuclear family (who hold a valid Policy with the Insurer for overseas travel insurance and a rider for cancellation and shortening of travel in regard of that trip), in the relative portion of the expenses paid by the Insured in advance (such as accommodation and car rental expenses), and/or accommodation

expenses in the case of lengthening the stay overseas beyond the insurance period and up to the amount of \$150 per day and/or in regard of a ticket to travel to Israel and/or the difference between an existing travel ticket and a replacement travel ticket for which a refund cannot be obtained from another party, and up to a total amount of \$1,000 and subject to that specified in the Limits of Liability Table in the Policy.

The Insurer will pay according to Section 15.5 solely and exclusively due to the following cases and on the condition that they occurred overseas during the situation of an epidemic, to the Insured and/or the nuclear family and/or an accompanying traveler and after purchasing this rider:

- 15.5.1.** An illness with fever or other symptoms that are likely to indicate the epidemic disease and were detected in the Insured and/or the nuclear family and/or an accompanying traveler, at the airport, and because of which the Insured and/or the nuclear family and/or an accompanying traveler are forbidden to join the flight to return to Israel.
- 15.5.2.** The Insured and/or the nuclear family and/or an accompanying traveler fell ill with an illness regarding which an epidemic event was declared.
- 15.5.3.** The imposition of closure in the country of stay overseas, because of which it is not possible to fly back to Israel on the planned date. In this matter - "**closure**" is a blockade on the country that limits departure or entry of aircraft from or to it.

To eliminate doubt, it is clarified that the coverage in regard of an event as defined in Section 15.5 is not in addition to the undertaking in Section 15.3 above, and the Insured will be entitled to coverage for only one of Sections 15.3 or 15.5, the lower of them in the limits of liability ceiling, subject to the terms specified.

For the avoidance of doubt, the Insured will assign his right to indemnification for an unused Plane Ticket from a third party in favor of the Insured, at the Insurer's request.

15.6. Other exclusions for this chapter in addition to the exclusions of the Basic Policy:

The Insurer will not pay any claim(s) deriving from or relating to:

- 15.6.1.** Law or government regulation, delay or amendment or revision of the registered timetable of an airline, failure in providing information of any part of the planned vacation (including mistake, failure or omission) by any service provider constituting part of the planned Trip or by any agent or trip organizer through which the Trip was registered or booked.
- 15.6.2.** Unwillingness of any Insured to set out on a trip or shortening of a trip or stay abroad arising from any other reason other than the said in Sections 15.2, 15.3, 15.4, 15.5 above.
- 15.6.3.** Travel expenses and refunding of a trip overseas, due to cancellation of the trip or its shortening or staying overseas.
- 15.6.4.** The result of a crime or criminal proceedings of any person on whom the trip plans rely, except for a delay of the Insured and/or Trip Escort to go on the Trip resulting from a subpoena to testify in court.

- 15.6.5. A failure in providing a notice to a travel agency or trip organizer or provider of transportation or accommodation services promptly when it was clarified that the Trip should be cancelled or shortened.
- 15.6.6. A claim for pro-rata refund of an original Plane Ticket used for leaving and returning to Israel or replaced with another by the carrier in an event of delayed return, Trip Shortening or discontinuation.
- 15.6.7. Trip and stay expenses incurred by the Insured which he would have incurred notwithstanding the occurrence of the medical event or return to Israel.

15.7. Increase in the ceiling of the refund for the rider for cancellation and shortening of a trip:

The possibility of increasing the ceiling of the refund per Insured for the coverage during an epidemic as said in Section 15.4 and in Section 15.5 above.

On the condition that the increase in the ceiling of the refund was purchased as part of purchasing the rider for cancellation and shortening of a trip and for additional insurance fees, and this is explicitly noted on the List Page - the ceiling of the refund in regard of Sections 15.4, 15.5 above will be as follows:

15.7.1. Increase in the ceiling of the refund in Section 15.4 (except in the case of home isolation in Section 15.4.3):

In the case of purchase of an increased ceiling as said above - the undertaking of the Insurer in regard of loss of payments due to cancellation of a trip for the Insured and/or the nuclear family as specified in Sections 15.4.1 and 15.4.2 above, and according to the terms and restrictions set forth in Section 15.4 above, will include loss in regard of forfeit of deposits related directly to the trip that are not refunded and/or a travel ticket and/or payments related directly to the trip that were paid in advance or that the Insured must pay and that are not refunded and for which a refund cannot be obtained (such as accommodation and car rental expenses) from another party, and up to an overall total of \$5,000 and of this \$2,000 per travel ticket per Insured and subject to that specified in the Limits of Liability Table of the Policy. **It is clarified that increasing the refund ceiling in this section will not apply in the case of home quarantine as specified in Section 15.4.3 above. It is also clarified that the overall total in this section replaces the overall total specified in Section 15.4 above (except for that specified in Section 15.4.3 above), and is not in addition to the total undertaking in Section 15.4.**

15.7.2. Increase of the refund ceiling of Section 15.5:

In the case of purchase of an increased ceiling as said above - The undertaking of the Insurer due to staying overseas in the case of a medical event that occurred due to an epidemic because of which the Insured is forced to extend or shorten his stay overseas according to the terms and restrictions set forth in Section 15.5 above, in regard of loss of payments for which a refund cannot be obtained and/or accommodation expenses in the case of extending a stay overseas, will be up to the overall amount of \$5,000 and of this, \$2,000 per

travel ticket of an Insured and subject to that specified in the Limits of Liability Table of the Policy. It is clarified that the overall total in this section replaces the overall total specified in Section 15.5 above, and is not in addition to the total undertaking in Section 15.5.

It is clarified that purchase of the increased refund ceiling as specified will increase solely and exclusively the refund ceiling according to that specified above and as set forth in the Limits of Liability Table in the Policy. The other terms of coverage in these sections will apply without change.

Chapter 16: Extension for Deterioration of Pre-existing Medical Condition

16. Provided that this cover was purchased for extra premium and this was explicitly indicated on the Schedule.

16.1. Additional definitions for this chapter:

16.1.1. **Pre-existing Medical Condition:** a Disease and/or medical condition due to which the Insured was under treatment, including drug therapy only and/or under care when leaving Abroad or during the 6 months preceding his leave and excluding when receiving the treatment was the purpose of the Trip.

16.1.2. **Special Deterioration of Pre-existing Medical Condition:** an adverse, sudden and unexpected change of a Pre-existing Medical Condition the treatment of which was vital as an emergency treatment Abroad and the Insured could not medically postpone the treatment until returning to Israel.

16.1.3. **The Maximal Period for this chapter (unless otherwise approved by the Insurer):**

For Insured up to the age of 60 (inclusive) - up to 45 days as of the day of leaving Abroad.

For Insured from the age of 61 to the age of 70 (inclusive) - up to 30 days as of the day of leaving Abroad.

For Insured from the age of 71 to the age of 80 (inclusive) - up to 15 days as of the day of leaving Abroad.

For Insured from the age of 81 to the age of 85 (inclusive) - up to 10 days as of the day of leaving Abroad.

For Insured aged 86 to 95 (inclusive) - up to 7 days from date of departure for overseas.

16.2. **Insurer's undertaking:** the Insurer will provide service or pay the Insured or provide the Insured with a letter of financial undertaking for reimbursement for Events covered under the Policy and the insurance extensions he purchased with the Insurer and noted on the Schedule, which are the result of a Special Deterioration of Pre-existing Medical Condition as defined above, subject to the terms, definitions, exclusions and limits of liability stated in the Basic Policy and in this extension, according to the lower.

The Insurer's undertaking in this chapter is up to a total amount of **\$350,000** subject to the Limits of Liability Table of Part B and is not in addition to the Insured's undertaking in the Basic Policy.

16.3. Other exclusions for this chapter in addition to the exclusions of the Basic Policy:
The Insurer will not pay any claim(s) deriving from or relating to:

16.3.1. The Insurer will not pay claim/s deriving from or related to transplantation of organ(s).

Chapter 17: Extension for pregnancy up to week 32 to an Insured under 42 years of age

17. Provided that this cover was purchased for extra premium and this was explicitly indicated on the Schedule.

17.1. **Insurer's undertaking:** The Insurer will pay an Insured who is not yet 42 years of age on the date of Event and who is pregnant up to week 32 (inclusive) on the date of Event, Medical Expenses in regard of unexpected worsening related to pregnancy and Medical Flight, as follows:

Hospitalization Expenses Abroad and non-Hospitalization Medical Expenses Abroad, premature birth and including expenses relating to treatment and/or Hospitalization of the fetus or preemie and his Medical Flight.

The Insurer's undertaking in this chapter is up to a total amount of \$350,000 subject to the Limits of Liability Table of Part B and is not in addition to the Insured's undertaking in the Basic Policy.

17.2. Other exclusions for this chapter in addition to the exclusions of the Basic Policy: The Insurer will not pay any claim(s) deriving from or relating to the following conditions:

17.2.1. Abortion.

17.2.2. Routine and genetic tests and/or lab tests relating to the pregnancy and its development.

Chapter 18: Death or loss of organs as a result or an accidental event to an Insured (up to the age of 70)

18. Provided that this cover was purchased for extra premium and this was explicitly indicated on the Schedule.

18.1. Additional definitions for this chapter:

18.1.1. **Insurance Event** for the matter of this chapter:

Death of the Insured or loss of his limbs/organs, as a direct consequence of an Accident that took place Abroad during the Period of Insurance.

18.1.2. **Loss of Organs:**

Total absolute loss, anatomical or functional, of an organ or limb (which appear in the table under section 18.2.2) or the parts thereof.

18.2. **Insurer's undertaking:**

In regard of the Insurance Event, the insurance benefits will be paid as follows:

18.2.1. **Insured's Death** – the amount of \$50,000 as stated in the Limits of Liability Table in the Policy The insurance benefits will be paid to the heirs according to a will probate order or inheritance order.

18.2.2. **Loss of Organ(s)** – insurance benefits, calculated in percents out of a total of \$13,500 according to the rate stated in this table with respect to the injured organ and subject to the Limits of Liability Table in the Policy. **Example: if the Insured loses his leg and the maximal insurance amount stated is \$10,000, the Insured will receive in this case: $10,000 \times 40\% = \$4,000$.**

Loss of Organ(s)	Rate of the sum insured
Vision in both eyes	100%
Use of both hands or legs	100%
Right arm or hand	60%*
Left arm or hand	50%*
One leg	40%
Vision of one eye	25%
Thumb in either hand	16%
Right forefinger	14%*
Left forefinger	12%*
Right little finger	12%*
Left little finger	10%*
Right middle finger	8%*
Left middle finger	6%*
Ring finger of either hand	6%
Big toe	5%

Loss of Organ(s)	Rate of the sum insured
Any other toe	3%
Hearing in both ears	40%
Hearing on one ear	10%

*With respect to left-handed persons - the opposite: apply the percents stated to the right hand to the left hand, and in an injury to the right hand - according to percents of the left hand.

18.3. Other exclusions for this chapter in addition to the exclusions of the Basic Policy:
The Insurer will not pay any claim(s) deriving from or relating to:

18.3.1. Loss of another organ which is not indicated in the above table.

18.3.2. Plastic surgery disability.

The Insurer's total maximal undertaking under this chapter will not exceed the maximal amount stated in the Limits of Liability Table in the Policy with respect of this chapter.

Chapter 19: Extension for extreme sport

19. Provided that this cover was purchased for extra premium and this was explicitly indicated on the Schedule.

19.1. Additional definitions for this chapter:

19.1.1. **Extreme Sport:**

Sport branches that include or require from those engaged in them, inter alia, high levels of difficulty and/or physical effort and/or involve a high level of risk according to the list of extreme sport branches correct on the date of purchase of the coverage, and which is updated from time to time and published on the Company's Internet website: www.harel-group.co.il.

19.2. **Insurer's undertaking:** the Insurer will pay the Insured Hospitalization Expenses, Medical Expenses and insurance benefits for other expenses that derive from the Insured's participation in Extreme Sport activity as defined above, performed Abroad only, which are covered under the Basic Policy. Purchasing this extension will not constitute waiver of any license and/or permit required as a result of performing the sport in that country.

It is clarified that an Insured Event that derives from Extreme Sport activity will not be covered if the Insured did not have a valid license and/or permit for performing that sport as required in that country Abroad when performing the activity.

19.3. Other exclusions for this chapter in addition to the exclusions of the Basic Policy: The Insurer will not pay any claim(s) deriving from or relating to:

19.3.1. Winter sport (as defined in Section 20.1.1 hereunder) including winter skiing and/or snowboard and/or toboggan and/or snowmobiles unless an extension for winter sport was purchased for extra insurance premium.

19.3.2. The Insured's participation in Extreme Sport which entails monetary wage.

The Insurer's undertaking under this chapter is up to the limit of liability stated in the Basic Policy for Medical Expenses which is a total amount of \$5,000,000 less Deductible of \$50 for this chapter, and subject to the Limits of Liability Table for Chapter B in the Policy and it is included in the Insurer's undertaking (not in addition) to the Medical Expenses Liability Limit in the Basic Policy, such that the total amounts paid by the Insurer by virtue of all the chapters included in the Policy, including this chapter, will in no event exceed the limits of liability indicated in the Basic Policy.

Chapter 20: Extension for winter sport

20. Provided that this cover was purchased for extra premium and this was explicitly indicated on the Schedule.

20.1. **Additional definitions for this chapter:**

20.1.1. **Winter Sport:**

Skiing with skis, snowboard, sleds, snowshoeing, cross country - walk skiing) and snowmobiles, performed in a designated resort in the resort's proclaimed activity hours and in the tracks marked and designated to that end.

20.1.2. **Ski Pass:**

Access ticket to the cable car used to climb and descend the ski resort lifts.

20.1.3. **Winter Sport Equipment:**

Skis, snowboard, ski boots, ski clothes, thermal clothing, gloves.

20.2. **Insurer's undertaking:** the Insurer will pay the Insured Hospitalization Expenses and non-Hospitalization Medical Expenses Abroad which are covered under this Policy up to the Medical Expenses Liability Limit of \$5,000,000 (less Deductible of \$50 for non-Hospitalization Medical Expenses) as well as insurance benefits for other expenses covered under this Policy deriving from the Insured's participation in Winter Sport Abroad as well as indemnification as set forth below and stated in the Limits of Liability Table for this chapter, subject to the terms, exclusions and limits of liability indicated in the Basic Policy and in this chapter.

20.2.1. **Loss of ski days:** the Insurer will indemnify the Insured for expenses involved with purchase of a Ski Pass for unused days as a result of an Event sustained by the Insured up to a total amount of \$300 and subject to the Limits of Liability Table in the Policy. Deductible of \$50 will apply to this section.

For the avoidance of doubt, the Insurer will not pay any expenses for loss of Ski Pass days which have not been paid in advance by the Insured.

20.2.2. **Trip Cancellation due to lack of snow at the ski resort:** the Insurer will indemnify the Insured for Trip Cancellation to a ski resort following the decision of the authorities in the relevant country not to open the resort due to lack of snow, **subject to producing to the Insurer a suitable confirmation of the competent authorities for the relevant period.** The indemnification will be for payments made in advance by the Insured for a ski package for a period not less than 4 day that was purchased at least 30 days prior to the Insured's Trip, for Trip periods between the dates December 15 and March 31, for each calendar year and up to an amount of \$300 per Plane Ticket and up to an amount of \$50 per day for ground services for a Maximal Period of 6 actual ski days and subject to the Limits of Liability Table in the

Policy. Deductible of \$50 will apply to this section. **For the avoidance of doubt**, the Insured will not be entitled under these circumstances to coverage of loss of payments due to Trip Cancellation, but rather to compensation as specified in this section only.

- 20.2.3. **Delay in arrival at the ski resort due to weather:** in an event of a delay of more than 24 hours from the planned date in the Insured's arrival at the ski resort for the first time, which is caused as a result of entitling weather (as defined in the following), the Insurer will indemnify the Insured for the period of delay up to an amount of \$50 per day of delay and up to a Maximal Period of delay of 6 actual ski days and subject to the Limits of Liability Table in the Policy. Deductible of \$50 will apply to this section.

Entitling weather for the purpose of this section:

Poor weather conditions due to which the Insured's arrival at the ski resort is denied in the acceptable means of transportation for getting to the site.

- 20.2.4. **Loss of ski days as a result of resort closure for a period of 48 hours and more:**

The Insurer will indemnify the Insured for loss of actually unused ski days as a result of closing the ski resort for a period of exceeding 48 consecutive hours caused due to an entitling event, provided that the Insured paid for a flight/travel, stay and a Ski Pass in advance and up to an amount of \$75 per unused day following the close of the resort as aforesaid and up to maximal loss of 6 actual ski days. Deductible of \$50 will apply to this section.

It is clarified that the arrival day and departure day will not be counted in the number of days for the purpose of receiving financial compensation.

Entitling event for the purpose of this section:

Poor weather conditions that do not allow the opening of the resort for 48 consecutive hours, subject to the Insurer being presented with suitable confirmation by the competent authorities of not opening the site during the relevant period.

For the avoidance of doubt, only producing a suitable confirmation of the competent authorities as to not opening the resort during the relevant period will entitle the Insured under this section.

It is clarified that the Insured will not be entitled, under these circumstances, to cover of Loss of Payments due to Trip Shortening but rather to the compensation specified in this section only.

- 20.2.5. **Delay in arrival of Winter Sport Equipment:**

The Insurer will indemnify the Insured for any delay of over 24 hours from the planned date in the arrival of Winter Sport Equipment caused due to the airline's negligence. Indemnification will be made against producing the airline's confirmation for the non-arrival of such equipment in full or in part. The Insurer will indemnify the

Insured for renting skiing equipment for the first day only and up to an amount of \$200 out of which up to an amount of \$20 per one item and subject to the amount stated in the Limits of Liability Table in the Policy.

20.3. Other exclusions for this chapter in addition to the exclusions of the Basic Policy:

20.3.1. The Insurer will not pay any claim(s) deriving from or relating to an Insured Event that occurred in view of or as a result of the Insured having acted in non-compliance with the safety rules of the resort or framework where there was activity and/or Winter Sport that was not performed on the designated resort and/or during the resort's proclaimed activity hours and/or in the tracks designated to that end.

The Insurer's undertaking to cover Medical Expenses under this chapter is up to the Medical Expenses Liability Limit stated in the Basic Policy which is a total amount of \$5,000,000 (less Deductible of \$50 for non-Hospitalization Expenses) and subject to the Limits of Liability Table for Part B in the Policy and it is included in the Insurer's undertaking (not in addition) to the Medical Expenses Liability Limit in the Basic Policy, such that the total amounts paid by the Insurer by virtue of all the chapters included in the Policy, including this chapter, will in no event exceed the limits of liability indicated in the Basic Policy.

Chapter 21: Extension for loss or theft of a laptop/tablet

21. Provided that this cover was purchased for extra premium and this was explicitly indicated on the Schedule.

- 21.1. Insurer's undertaking: the Insurer will indemnify the Insured for the loss or theft of a laptop/tablet Abroad within the Period of Insurance and provided that the Insured purchased the laptop/tablet prior to the beginning of the Period of Insurance. (In any other case the cover will be in accordance with Chapter 14 – Extension for Luggage, if purchased – sections 14.4.1 – 14.4.2.
- 21.2. The amount of indemnification will be as specified in the Limits of Liability Table in the Policy but not more than the real value of the laptop (less wear and tear as defined in the Luggage chapter) and less Deductible in the amount of \$100.

21.3. Other exclusions for this chapter in addition to the exclusions of the Basic Policy: The Insurer will not pay any claim(s) deriving from or relating to:

- 21.3.1. Confiscation and/or expropriation of the laptop/tablet.
- 21.3.2. Damage of any kind, direct or consequential, to the laptop/tablet.
- 21.3.3. Loss or theft or damage to one or more software, whether or not they are part of the laptop.

The Insurer's undertaking under this chapter is up to an amount of \$2,000 (less Deductible of \$100) and subject to the Limits of Liability Table.

Chapter 22: Extension for loss or theft of a cellular phone

22. Provided that this cover was purchased for extra premium and this was explicitly indicated on the Schedule.

22.1. Insurer's undertaking: the Insurer will indemnify the Insured in the event of loss or theft of the cellular phone carried by the Insured when leaving Israel Abroad and provided that the loss/theft of such phone occurred Abroad within the Period of Insurance.

22.2. The amount of indemnification paid by the Insurer to the Insured will as specified in the Limits of Liability Table in the Policy but not more than the real value of the cellular phone and less Deductible in the amount of \$200.

The Insurer's undertaking under this chapter is up to an amount of \$750 (less Deductible of \$200) and subject to the Limits of Liability Table.

Chapter 23: Extension for 2 wheel bicycle (up to 90 days) – total loss or theft or damage exceeding 50%

23. Provided that this cover was purchased for extra premium and this was explicitly indicated on the Schedule.

23.1. **Additional definitions for this chapter:**

23.1.1. **Bicycle:**

Bicycle according to Israeli standards which is ridden by the Insured and has no motor, provided that the bicycle was purchased in Israel or was imported to Israel before the Insured's went Abroad.

23.1.2. **Appraiser's Evaluation:**

An evaluation given to the Insured up to one month at the most prior to the beginning of the insurance to which an updated photo of the Bicycle was attached or an evaluation given after total loss of the Bicycle or damage exceeding 50%, pursuant to the provisions of Section 23.1.3 hereunder.

23.1.3. **Bicycle Total Loss or Damage Exceeding 50%:**

Bicycle which is out of order as a result of an Insured Event covered under this chapter which, according to an Appraiser's Evaluation, cannot be fixed in Israel at a lower cost than 51% of its value (as its value will be determined by the Appraiser).

23.2. **Provisions regarding Appraiser's Evaluation:**

23.2.1. The Insured may disagree with the Appraiser's Evaluation and present a counter evaluation.

23.2.2. An Appraiser's Evaluation up to \$100 will be at the Insurer's account.

23.3. **Insurer's undertaking:** the Insurer will indemnify the Insured for an Event that occurred to the Bicycle Abroad according to the following specification. In an event of Total Loss, the Insurer will pay the real financial value of the Bicycle as it was shortly before the occurrence of damage.

23.3.1. **Insured Bicycle Total Loss or Damage Exceeding 50%** which occurs in the course of the Insured's ordinary use (when it was not in possession of a carrier) and subject to the following accumulative conditions:

23.3.1.1. The Bicycle was used during the hours of darkness when it was equipped with functioning light and reflectors.

23.3.1.2. The Insured produced a Police confirmation at the place of Event Abroad as to the accidental event caused to the Bicycle.

23.3.1.3. The loss or damage was not caused as a direct or indirect result of the Insured's deliberate action.

23.3.1.4. Not more than one person rode the Bicycle at the same time.

23.3.1.5. The Insured produced a Police confirmation, if available, at the place of Event Abroad as to the Bicycle Total Loss of the Bicycle.

- 23.3.2. **Theft of Bicycle** subject to the following accumulative conditions:
- 23.3.2.1. At the time of theft the Bicycle was locked and tied by means of a chain and lock anchored to the ground or to a wall or was in a private place whose openings are closed and locked.
 - 23.3.2.2. The Insured produced a **Police confirmation** at the place of Event Abroad as to the theft of the Bicycle including its whereabouts at the time of theft.
 - 23.3.2.3. If the stolen Bicycle had been found before the insurance benefits were paid for it under this chapter, the Bicycle will be given back to the Insured and the Insurer will not pay insurance benefits, unless Total Loss or Damage Exceeding 50% has been caused to the returned Bicycle.
 - 23.3.2.4. If the stolen Bicycle was found after the insurance benefits had been paid for them, the Bicycle will transfer to the Insurer's ownership.
- 23.3.3. **Insured Bicycle Total Loss as a result of an Accident to a carrier** that occurred in the course of carrying the Bicycle in or on a vehicle, and subject to the following accumulative conditions:
- 23.3.3.1. The transportation through the vehicle was performed by means of a dedicated rack with the Bicycle anchored according to the rack manufacturer's instructions.
 - 23.3.3.2. The Insured produced a **Police confirmation** at the place of Event Abroad as to the accidental Event that occurred to the carrying vehicle.
 - 23.3.3.3. The Insured produced a notice delivery confirmation to the carrier - an Insured who fails to do so will be entitled to insurance benefits at the rate of the difference between the refund that he could have received from the carrier and the cover overhead for this section.
- 23.3.3.4. **Damage from Accident or theft to Bicycle in possession of an air carrier**, subject to Deductible of \$1,000 and subject to the following accumulative conditions:
- 23.3.3.4.1. The transportation through the vehicle was performed by means of a dedicated rack, as required, with the Bicycle anchored according to the rack manufacturer's instructions.
 - 23.3.3.4.2. The Insured produced a notice delivery confirmation to the carrier - an Insured who fails to do so will be entitled to insurance benefits at the rate of the difference between the refund that he could have received from the carrier and the cover overhead for this section.

Any amount paid to the Insured from any other body as well as Deductible of \$1,000 from the carrier as stated in Section 23.3.4 will

be deducted from the amount of indemnification under Sections 23.3.1 - 23.3.4.

- 23.3.4. The Insured will inform the carrier that has the Bicycle in its possession of a damage resulting from an Accident or theft shortly after the occurrence of the Insured Event.
- 23.3.5. The cover under Sections 23.3.1, 23.3.3 and 23.3.4 is upon the condition that the Insured returned the Bicycle to Israel (unless he has no option to return the Bicycle in which case he will forward photos and the authorities' report due to the Event) and present an Appraiser's Evaluation to the Insurer.

23.3.6. Other exclusions for this chapter in addition to the exclusions of the Basic Policy:

The Insurer will not pay any claim(s) deriving from or relating to:

23.3.6.1. Bicycle Total Loss as a result of using the Bicycle during a race.

23.3.6.2. Bicycle Total Loss as a result of extreme activity, including cross country (CX) which is also called Mountain Bike sport (MTB), All Mountain (AM) or Enduro, Down Hill (DH), Free Ride (FR), jumps and/or acrobatic stunts.

23.3.6.3. Any Bicycle Damage including natural wearing down, depreciation, wear and tear, breakdowns of any kind, except for damage due to which total loss is caused as specified in Section 23.3.1.

23.3.6.4. Bicycle Total Loss as a result of drug or alcohol abuse.

23.3.6.5. Riding Bicycle not in paved roads or leveled dirt roads.

23.3.6.6. Damage that occurred to the Bicycle prior to the purchase of this extension as a result of which the value of Bicycle has decreased.

23.4. Insurance benefits and Deductible:

The insurance benefits will be up to the amount stated in the Limits of Liability Table in this Policy according to the purchased amount indicated on the Schedule and less Deductible as specified in the Limits of Liability Table in the Policy.

The Insurer's undertaking under this chapter is up to an amount of \$2,500 or \$4,500 or \$6,000 according to the purchased amount indicated on the Schedule (less Deductible for Total Loss \$50, theft \$250, damage or theft when in possession of an air carrier \$1,000) and subject to the Limits of Liability Table.

Chapter 24: Extension for cancellation of Deductible in case of accidental damage to a hired car/caravan Abroad (to a driver between 24 to 75 years of age)

24. Provided that this cover was purchased for extra premium and this was explicitly indicated on the Schedule.

24.1. Additional definitions for this chapter:

- 24.1.1. **Insured:** the Insured as defined in the Policy and provided that his name is listed in the rental agreement with the rental company.
- 24.1.2. **The Car Rental Agreement:** a car rental agreement Abroad signed between the Insured and a car rental company.
- 24.1.3. **Deductible for Rental:** the Insured's share in the expense for theft or damage caused to a vehicle in accordance with a Car Rental Agreement.
- 24.1.4. **Vehicle:** a private or commercial vehicle.
- 24.1.5. **Caravan:** a motored caravan with a composite body constituting a Vehicle in itself.

24.2. Insurer's undertaking:

The Insurer will indemnify the Insured for Deductible actually borne by the Insured up to a maximal amount of \$1,500 actually borne or ought to be borne by the Insured in accordance with the Car Rental Agreement, in the event of accidental damage to property that occurred to a Vehicle or Caravan Abroad or in the event of accidental damage to a third party's property as a result of using a Vehicle or Caravan Abroad, which occurred during the Period of Insurance.

The Insured's undertaking under this chapter is up to an amount of \$1,500 and subject to the Limits of Liability Table.

24.3. Other exclusions for this chapter in addition to the exclusions of the Basic Policy:
The Insurer will not pay any claim(s) deriving from or relating to:

- 24.3.1. Consequential damage of any kind.
- 24.3.2. Use of a Vehicle and/or Caravan when the driver had no valid license for the country of Event. In the event that in the country of Event there is no need for a valid license for the relevant Vehicle, cover will only be given under this plan if the Insured had a valid Israeli and/or international license for the type of Vehicle he drove.
- 24.3.3. Loss or theft or damage to property that was in the Vehicle and/or Caravan including property rented from the Rental Company such as baby safety seat, GPS etc.
- 24.3.4. Mechanical problem in the Vehicle and/or Caravan, damage to tires except if those have been damaged as a result of an accidental event.
- 24.3.5. Use of a Vehicle and/or Caravan in contravention of the provisions of the Rental Agreement.
- 24.3.6. Driving of the Insured or the person licensed to driver under the influence of drugs.
- 24.3.7. Use of the Vehicle and/or Caravan for competition purpose of any kind.

- 24.3.8. Malice and/or crime and/or misdemeanor committed by the Insured and/or the driver.
- 24.3.9. Use of the Vehicle and/or Caravan not in a paved dedicated road for the use of all types of vehicles.

Contact Centers

In any case of a claim, contact Harel Insurance Company Ltd., as follows:

To receive coverage in an emergency (hospitalization overseas), contact:

The 24/7 Emergency Call Center: +972-3-7547030

Claims Department Fax: +972-3-7348168

Harel Contact Center Search and Rescue

The following are the contact center phone numbers, fax and e-mail address:

e-mail address: 669@harel-ins.co.il

Harel Search and Rescue phone number: +972-3-7547669

Harel Search and Rescue fax: +972-3-7348484

To submit a claim in Israel, contact:

Overseas Claims Department

3 Abba Hillel Street, P.O. Box 1951, Ramat Gan

For any purpose, you may call Harel at: **03-7457080**

Contact details

Head office

📍 Harel House, 3 Abba Hillel St.

PO Box 1951, Ramat Gan 5211802

☎ 03-7547080

🕒 Sunday-Thursday 8:00am - 4:00pm